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Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF ILLINOIS	_	
Case number (if known)	_ Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pai	rt 1:	Identify Yourself			
			About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):	
1.	You	r full name			
	your pictu exar licer Brin iden	e the name that is on a government-issued ure identification (for mple, your driver's use or passport). g your picture tification to your sting with the trustee.	Jonathan First name Matthew Middle name Johnson Last name and Suffix (Sr., Jr., II, III)	First name Middle name Last name and Suffix (Sr., Jr., II, III)	
2.	use Inclu	other names you have d in the last 8 years ude your married or den names.			
3.	you num Indi	y the last 4 digits of r Social Security nber or federal vidual Taxpayer ntification number N)	xxx-xx-7029		

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Debtor 1 Jonathan Matthew Johnson

Case number (if known)

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):			
4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years		■ I have not used any business name or EINs.	☐ I have not used any business name or EINs.			
	Include trade names and doing business as names	Business name(s)	Business name(s)			
		EINs	EINs			
5.	Where you live	614 Paxton Avenue	If Debtor 2 lives at a different address:			
		Calumet City, IL 60409 Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code			
		Cook				
		County	County			
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.			
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code			
6.	Why you are choosing this district to file for	Check one:	Check one:			
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	 Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. 			
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)			

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Debtor 1 Jonathan Matthew Johnson

Case number (if known)

ar	Tell the Court About	Your E	Bankruptcy Ca	se						
' .	The chapter of the Bankruptcy Code you are	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.								
	choosing to file under	■ C	■ Chapter 7							
			Chapter 11							
			Chapter 12							
			Chapter 13							
3.	How you will pay the fee		about how yo	u may pay. Typ attorney is sub	pically, if you are paying the fee	eck with the clerk's office in your local court for more de yourself, you may pay with cash, cashier's check, or mo ehalf, your attorney may pay with a credit card or check	oney			
			I need to pay The Filing Fe	the fee in ins	tallments. If you choose this operate (Official Form 103A).	otion, sign and attach the Application for Individuals to F	Pay			
			but is not requapplies to you	uired to, waive ur family size ar	your fee, and may do so only if nd you are unable to pay the fe	tion only if you are filing for Chapter 7. By law, a judge n your income is less than 150% of the official poverty lin- e in installments). If you choose this option, you must fill fficial Form 103B) and file it with your petition.	e that			
).	Have you filed for	■ N								
	bankruptcy within the last 8 years?									
	iast o years :	□ Ye	es. District		When	Case number				
			District		when When	Case number Case number				
			District		When	Case number				
0.	Are any bankruptcy cases pending or being	■ N	0							
	filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	□ Ye	∋s .							
			Debtor			Relationship to you				
			District		When	Case number, if known				
			Debtor			Relationship to you				
			District		When	Case number, if known				
1.	Do you rent your residence?	■ N	o. Go to li	ne 12.						
		☐ Ye	_{es.} Has yo	ur landlord obta	ained an eviction judgment aga	inst you and do you want to stay in your residence?				
				No. Go to line	12.					
				Yes. Fill out <i>In</i> bankruptcy pe		on Judgment Against You (Form 101A) and file it with thi	s			

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		Document	Page 4 01 47	
Debtor 1	Jonathan Matthew Johnson		3-	Case number (if known)

art	3: Report About Any Bu	sinesses	You Own	as a Sole Proprie	tor			
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	Part 4.				
		☐ Yes.	Name	and location of bus	iness			
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name	of business, if any				
	If you have more than one sole proprietorship, use a separate sheet and attach		Numb	er, Street, City, Stat	te & ZIP Code			
	it to this petition.		Check	k the appropriate bo	x to describe your business:			
				Health Care Busir	ness (as defined in 11 U.S.C. § 101(27A))			
				Single Asset Real	Estate (as defined in 11 U.S.C. § 101(51B))			
				Stockbroker (as d	efined in 11 U.S.C. § 101(53A))			
				Commodity Broke	er (as defined in 11 U.S.C. § 101(6))			
				None of the above				
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	deadlines	s. If you in is, cash-fl i.C. 1116(court must know whether you are a small business debtor so that it can set appropriate a small business debtor, you must attach your most recent balance sheet, statement of ederal income tax return or if any of these documents do not exist, follow the procedure				
	For a definition of small	No.	ı am n	ot filing under Chap	oter 11.			
	business debtor, see 11 U.S.C. § 101(51D).	□ No.		I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptc Code.				
		☐ Yes.	I am fi	ling under Chapter	11 and I am a small business debtor according to the definition in the Bankruptcy Code.			
art	4: Report if You Own or	Have Any	Hazardo	us Property or An	y Property That Needs Immediate Attention			
14.	Do you own or have any	■ No.						
	property that poses or is alleged to pose a threat of imminent and	Yes.	What is t	the hazard?				
	identifiable hazard to public health or safety? Or do you own any property that needs	If immediate attention is		liate attention is				
	immediate attention?			why is it needed?				
For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?			Where is	s the property?				
					Number, Street, City, State & Zip Code			

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Debtor 1 **Jonathan Matthew Johnson**

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

 ☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Case 17-34377 Desc Main Page 6 of 47 Document Case number (if known) Debtor 1 **Jonathan Matthew Johnson** Part 6: **Answer These Questions for Reporting Purposes** 16. What kind of debts do 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." you have? ☐ No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ☐ No. Go to line 16c. ☐ Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts 17. Are you filing under I am not filing under Chapter 7. Go to line 18. ■ No. Chapter 7? Do you estimate that I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses Yes. after any exempt are paid that funds will be available to distribute to unsecured creditors? property is excluded and administrative expenses ■ No are paid that funds will be available for ☐ Yes distribution to unsecured creditors? 18. How many Creditors do **1**,000-5,000 **1** 25,001-50,000 1-49 you estimate that you **5001-10,000 5**0,001-100,000 **50-99** owe? **1**0,001-25,000 ☐ More than 100,000 **1**00-199 □ 200-999 19. How much do you □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion **\$0 - \$50,000** estimate your assets to □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion **□** \$50,001 - \$100,000 be worth? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion **\$100,001 - \$500,000** ☐ More than \$50 billion □ \$100,000,001 - \$500 million □ \$500,001 - \$1 million 20. How much do you □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion **\$0 - \$50,000** estimate your liabilities □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion □ \$50,001 - \$100,000 to be? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion □ \$100,001 - \$500,000 □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500,001 - \$1 million Part 7: Sign Below For you I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11. United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Signature of Debtor 2

Executed on

/s/ Jonathan Matthew Johnson

November 16, 2017

Jonathan Matthew Johnson

Signature of Debtor 1

Executed on

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Debtor 1 Jonathan Matthew Johnson

Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Jeffrey	L. Benson	Date	November 16, 2017
Signature of	Attorney for Debtor		MM / DD / YYYY
Jeffrey L. Printed name	Benson		
Law Office	es of Jeffrey L. Benson		
Firm name			
3337 W. 95	5th Street		
Ste. # 2			
Evergreen	Park, IL 60805		
Number, Street,	City, State & ZIP Code		
Contact phone	312-607-0048	Email address	jeffrey-benson@sbcglobal.net
6203738			
Barnumbar & S	tata		

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Page 8 of 47 Document Fill in this information to identify your case: Debtor 1 Jonathan Matthew Johnson First Name Middle Name Last Name Debtor 2 (Spouse if, filing) First Name Middle Name Last Name United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS Case number (if known)

☐ Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

\$\$ Your Amou	9,400.00 liabilities nt you owe 11,200.00
\$ \$ Your Amou	9,400.00 9,400.00 liabilities nt you owe 11,200.00
\$ Your Amou	9,400.00 liabilities nt you owe 11,200.00
Amou	liabilities nt you owe 11,200.00
Amou	nt you owe 11,200.00
Amou	nt you owe 11,200.00
	·
\$	0.00
	0.00
\$	11,658.00
\$	22,858.00
\$	2,555.79
\$	3,003.00
ur other so	chedules.
	· -

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

the court with your other schedules.

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Debtor 1 **Jonathan Matthew Johnson**

From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

3,172.99

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total claim	
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

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Fill in this	information to ide	ntify your c	ase and t		1 MM: 10 M = 1			
Debtor 1	Jonathai	n Matthew	/ Johnso	n				
D 1 0	First Name		Middl	e Name	Last Name			
Debtor 2 (Spouse, if fili	ing) First Name		Middl	e Name	Last Name			
United Sta	ates Bankruptcy Cour	rt for the:	NORTHER	RN DISTRICT OF ILLIN	NOIS			
Case num	ber							Check if this is an
					-			amended filing
<u>Officia</u>	I Form 106 <i>P</i>	\ /B						
Sche	dule A/B:	Prope	erty					12/15
nformation. Answer eve	. If more space is need ry question.	ded, attach a	separate s		e are filing together, both a e top of any additional pag on or Have an Interest In			
. Do vou o	own or have any legal o	or equitable i	interest in	anv residence, building,	land, or similar property?			
	, ,			,	, pp,			
_	o to Part 2. Where is the property?							
	where is the property:							
Part 2: De	escribe Your Vehicles							
Do you ow					whether they are regist		e any vehic	cles you own that
Do you ow someone e		se a vehicle,	, also repo	ort it on Schedule G: Ex	whether they are regist xecutory Contracts and l		e any vehic	cles you own that
Oo you ow comeone e B. Cars, va □ No ■ Yes	else drives. If you leas	se a vehicle,	, also repo	ort it on <i>Schedule G: Ex</i>	xecutory Contracts and U	Jnexpired Leases.		cles you own that
Do you ow someone e	else drives. If you least	se a vehicle,	, also repo	ort it on Schedule G: Exes, motorcycles	xecutory Contracts and U	Do not deduct se the amount of an	ecured claims	
Oo you ow comeone e B. Cars, va □ No ■ Yes	cke: Chrysler 300	se a vehicle,	, also repo	ort it on <i>Schedule G: Ex</i>	xecutory Contracts and U	Do not deduct se the amount of an	ecured claims	s or exemptions. Put aims on <i>Schedule D:</i>
Do you own comeone et al. Cars, value of the comeone et al. Cars, value of the comeone of the co	ce: Chrysler del: 300 2007	se a vehicle,	w. also repo	es, motorcycles The has an interest in the	e property? Check one	Do not deduct se the amount of an	ecured claim: y secured cl ave Claims	s or exemptions. Put aims on <i>Schedule D:</i>
Do you ow comeone e	ke: Chrysler del: 300 2007 proximate mileage: er information:	se a vehicle, s, sport utili 120,0 mil	w also repo	es, motorcycles /ho has an interest in the Debtor 1 only Debtor 2 only	e property? Check one	Do not deduct se the amount of ar Creditors Who H	ecured claim: y secured cl ave Claims	s or exemptions. Put aims on Schedule D: Secured by Property.
Do you ow comeone e	ce: Chrysler del: 300 2007	se a vehicle, s, sport utili 120,0 mil	wehick webset one one one one one one one o	es, motorcycles Tho has an interest in the Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 of	e property? Check one	Do not deduct se the amount of ar Creditors Who H	ecured claims by secured cl ave Claims f the C	s or exemptions. Put laims on Schedule D: Secured by Property.

Part 3: Describe Your Personal and Household Items

Do you own or have any legal or equitable interest in any of the following items?

Current value of the portion you own?
Do not deduct secured claims or exemptions.

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Case number (if known) Document Debtor 1 Jonathan Matthew Johnson 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware Yes. Describe..... **Household Goods and Furniture** \$1,000.00 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games ☐ No Yes. Describe..... 3 TV \$500.00 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles ■ No ☐ Yes. Describe..... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments ■ No ☐ Yes. Describe..... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment ■ No ☐ Yes. Describe..... 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories □ No Yes. Describe..... Clothes \$500.00 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver □ No Yes. Describe..... \$100.00 Jewelry 13. Non-farm animals Examples: Dogs, cats, birds, horses ■ No ☐ Yes. Describe..... 14. Any other personal and household items you did not already list, including any health aids you did not list ■ No ☐ Yes. Give specific information.....

15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached for Part 3. Write that number here

\$2,100.00

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Document Page 12 of 47 Case number (if known) Debtor 1 Jonathan Matthew Johnson Part 4: Describe Your Financial Assets Do you own or have any legal or equitable interest in any of the following? Current value of the portion you own? Do not deduct secured claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition ☐ Yes..... 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. ☐ No Institution name: Yes..... \$400.00 CitiBank checking account - Aprox. \$400 17.1. Checking 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts □ No Institution or issuer name: ■ Yes..... \$400.00 Voya Stock - \$400 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture ■ No ☐ Yes. Give specific information about them..... Name of entity: % of ownership: 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. No ☐ Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans No ☐ Yes. List each account separately. Type of account: Institution name: 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others Nο Institution name or individual: ☐ Yes. 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) ■ No ☐ Yes..... Issuer name and description. 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).

■ No

Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): ☐ Yes.....

25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit

No

		Case 17-343	77 Do	oc 1	Filed 11/16/17 Document	Entered 11/1 Page 13 of 47		Desc Main
De	btor 1	Jonathan Matthe	w Johnso	on			Case number (if known)	
	☐ Yes.	Give specific informat	on about t	hem				
					ets, and other intellectu proceeds from royalties a		ts	
		Give specific informat	on about t	hem				
	Exam _i ■ No	es, franchises, and o oles: Building permits, of Give specific informat	exclusive li	censes	ingibles s, cooperative association	n holdings, liquor licens	es, professional licenso	es
М	oney or	property owed to you	?					Current value of the portion you own? Do not deduct secured claims or exemptions.
	Tax ref	funds owed to you						
	Yes.	Give specific informati	on about th	nem, in	cluding whether you alre	ady filed the returns an	d the tax years	
				Anti	icipated 2017 Income \$500	e Tax refund -		\$500.00
					Ψ500		_	
30.	Other a Examp	Give specific informati amounts someone ovoles: Unpaid wages, disbenefits; unpaid le	ves you sability insu pans you m		payments, disability ben someone else	efits, sick pay, vacation	pay, workers' comper	nsation, Social Security
		sts in insurance policion of the state of th		rance;	health savings account (HSA); credit, homeown	er's, or renter's insurar	ace
		Name the insurance of	ompany of Company i		policy and list its value.	Beneficiar	y:	Surrender or refund value:
			Term Life surrende		rance - No cash le			\$0.00
	If you somed		living trus		n someone who has die ct proceeds from a life in		currently entitled to rece	eive property because
	Claims	s against third parties	, whether		you have filed a lawsui		or payment	
	■ No	Describe each claim	·	u100, II	osianos olamo, or nyme	, to 540		
				ims of	f every nature, includin	a counterclaims of the	e debtor and rights to	set off claims
J4.	■ No	oonungent and uniqu	nualeu Cla	3 0	i every nature, includin	y counterclaims of the	c acotor and rights to	JOE OII CIAIIIIS
	☐ Yes.	Describe each claim						

Debt	Case 17-34377 or 1 Jonathan Matthew Jo		Filed 11/16/17 Document	Entered 1 Page 14 of	1/16/17 14:03:56 47 Case number (if known)	Desc Main
					cace named (in mount)	
_	ny financial assets you did not	already list				
	No Yes. Give specific information					
_	res. Give specific information					
36.	Add the dollar value of all of yo for Part 4. Write that number he					\$1,300.00
Part	Describe Any Business-Related	Property You O	Own or Have an Interest I	n. List any real esta	ate in Part 1.	
37. D	o you own or have any legal or equi	itable interest in	any business-related pr	operty?		
	No. Go to Part 6.					
	Yes. Go to line 38.					
Part	Describe Any Farm- and Comme If you own or have an interest in fa			or Have an Interes	st In.	
46. C	o you own or have any legal or	r equitable inte	erest in any farm- or o	ommercial fishin	g-related property?	
ļ	No. Go to Part 7.	•	•			
	Yes. Go to line 47.					
Part	7: Describe All Property You	Own or Have an	Interest in That You Did	Not List Above		
	Po you have other property of an Examples: Season tickets, country No Yes. Give specific information	y club member				
54.	Add the dollar value of all of yo	our entries fro	m Part 7. Write that n	umber here		\$0.00
Part	E: List the Totals of Each Part	of this Form				
55.	Part 1: Total real estate, line 2					\$0.00
56.	Part 2: Total vehicles, line 5			\$6,000.00		
57.	Part 3: Total personal and house	sehold items,	line 15	\$2,100.00		
58.	Part 4: Total financial assets, li	ine 36		\$1,300.00		
59.	Part 5: Total business-related p	property, line	45	\$0.00		
	Part 6: Total farm- and fishing-			\$0.00		
61.	Part 7: Total other property not	t listed, line 54	+	\$0.00		
62.	Total personal property. Add lin	nes 56 through	61	\$9,400.00	Copy personal property to	otal \$9,400.0 0
63.	Total of all property on Schedu	ıle A/B. Add lin	ne 55 + line 62			\$9,400.00

Official Form 106A/B Schedule A/B: Property page 5

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Fill in this infor	mation to identify your	case:		
Debtor 1	Jonathan Matthe	w Johnson		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:		NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim as Exem

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
Copy the value from Schedule A/B	Che	ck only one box for each exemption.	
\$1,000.00		\$1,000.00	735 ILCS 5/12-1001(b)
		100% of fair market value, up to any applicable statutory limit	
\$500.00		\$500.00	735 ILCS 5/12-1001(b)
		100% of fair market value, up to any applicable statutory limit	
\$500.00		\$500.00	735 ILCS 5/12-1001(a)
		100% of fair market value, up to any applicable statutory limit	
\$100.00		\$100.00	735 ILCS 5/12-1001(b)
		100% of fair market value, up to any applicable statutory limit	
\$400.00		\$400.00	735 ILCS 5/12-1001(b)
		100% of fair market value, up to any applicable statutory limit	
	\$1,000.00 \$100.00 \$100.00	\$1,000.00	Stooloo \$1,000.00 \$1,000.00 \$1,000.00 \$1,000.00 \$1,000.00 \$500.00 \$500.00 \$500.00 \$500.00 \$500.00 \$100% of fair market value, up to any applicable statutory limit \$500.00 \$100% of fair market value, up to any applicable statutory limit \$100% of fair market value, up to any applicable statutory limit \$100.00 \$100% of fair market value, up to any applicable statutory limit \$100.00 \$100% of fair market value, up to any applicable statutory limit \$400.00 \$400.00 \$100% of fair market value, up to any applicable statutory limit

Entered 11/16/17 14:03:56 Page 16 of 47 Document Case number (if known) Debtor 1 Jonathan Matthew Johnson Brief description of the property and line on Current value of the Amount of the exemption you claim Specific laws that allow exemption Schedule A/B that lists this property portion you own Copy the value from Check only one box for each exemption. Schedule A/B Voya Stock - \$400 735 ILCS 5/12-1001(b) \$400.00 \$400.00 Line from Schedule A/B: 18.1 100% of fair market value, up to any applicable statutory limit Anticipated 2017 Income Tax refund -735 ILCS 5/12-1001(b) \$500.00 \$500.00 \$500 Line from Schedule A/B: 28.1 100% of fair market value, up to any applicable statutory limit (Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.)

3.	Are you	claimi	ng a	homesteac	l exemption	of more	than	\$160,375?

Doc 1

Case 17-34377

- Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?

Filed 11/16/17

- No
- Yes

Desc Main

(Case 17-34377		./16/17 Entere nent Page 17	d 11/16/17 14:0 7 of 47	03:56 Desc M	lain
Fill in this inf	ormation to identify you					
Debtor 1	Jonathan Matth	ew Johnson Middle Name	Last Name			
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name			
United States	Bankruptcy Court for the:	NORTHERN DISTRI	CT OF ILLINOIS			
Case number						if this is an ed filing
	orm 106D le D: Creditors	: Who Have CI	aims Secured	hy Property	J	12/15
s needed, copy	and accurate as possible. the Additional Page, fill it o					
number (if knov	vn). tors have claims secured by	v vour property?				
`	eck this box and submit the		vour other schedules. Yo	ou have nothing else to	report on this form.	
_	ill in all of the information		, ca. cac. cocaa.cc	ou navo noug 0.00 to		
	t All Secured Claims	bolow.				
	red claims. If a creditor has r	more than one secured claim	list the creditor congrately	Column A	Column B	Column C
for each claim.	If more than one creditor has le, list the claims in alphabeti	a particular claim, list the ot	her creditors in Part 2. As	Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any
2.1 Ally Fi	nancial	Describe the property that	at secures the claim:	\$11,200.00	\$6,000.00	\$5,200.00
_	ox 380901 apolis, MN 55438	2007 Chrysler 300 1 miles Debtor is surrender As of the date you file, the apply. ☐ Contingent	ing vehichle			
Number, S	treet, City, State & Zip Code	☐ Unliquidated☐ Disputed				
Who owes the	e debt? Check one.	Nature of lien. Check all	that apply.			
■ Debtor 1 on	•	An agreement you mad car loan)				
Debtor 1 and	•	☐ Statutory lien (such as	tax lien, mechanic's lien)			
	of the debtors and another	☐ Judgment lien from a la				
☐ Check if thi community	s claim relates to a y debt	☐ Other (including a right	to offset)			

Add the dollar value of your entries in Column A on this page. Write that number here:

\$11,200.00

If this is the last page of your form, add the dollar value totals from all pages.

Write that number here:

\$11,200.00

Last 4 digits of account number

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

4247

Date debt was incurred

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	0400 17 04077 1	Document	Page 18 of 47	7.00 Desc Main
Fill in this in	formation to identify your			
Debtor 1	Jonathan Matthey	w Johnson		
DODIOI 1	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States	Bankruptcy Court for the:	NORTHERN DISTRICT OF I	ILLINOIS	
Case numbe	r			
(if known)				☐ Check if this is an
				amended filing
Official E	orm 106E/F			
		ho Have Unsecured	d Claims	12/15
			RITY claims and Part 2 for creditors with NOI	
Schedule D: Ci eft. Attach the name and case	reditors Who Have Claims Sec Continuation Page to this page number (if known).	ured by Property. If more space i le. If you have no information to r	. Do not include any creditors with partially s needed, copy the Part you need, fill it out, report in a Part, do not file that Part. On the	number the entries in the boxes on the
	st All of Your PRIORITY Un			
_ ′	editors have priority unsecure	d claims against you?		
No. Go	to Part 2.			
☐ Yes.				
Part 2:	st All of Your NONPRIORIT	Y Unsecured Claims		
3. Do any cr	editors have nonpriority unsec	cured claims against you?		
☐ No. Yo	u have nothing to report in this p	art. Submit this form to the court wit	th your other schedules.	
Yes.				
unsecured	claim, list the creditor separately	y for each claim. For each claim list	the creditor who holds each claim. If a credited, identify what type of claim it is. Do not list clue have more than three nonpriority unsecured to	laims already included in Part 1. If more
				Total claim
4.1 Ame	erican Credit Bureau	Last 4 digits of a	ccount number	\$374.00
Nonp	riority Creditor's Name			
	Box 4545	When was the de	bt incurred?	
	nton Beach, FL 33437 per Street City State Zlp Code	As of the date yo	u file, the claim is: Check all that apply	
	incurred the debt? Check one.	7.0 0. 10 44.0 70	ш, сшс. сс.к ал илак арр.,	
■ De	ebtor 1 only	☐ Contingent		
	ebtor 2 only	☐ Unliquidated		
	ebtor 1 and Debtor 2 only	☐ Disputed		
_	least one of the debtors and and	T (NONEDIC	ORITY unsecured claim:	
	heck if this claim is for a com			
debt	noon ii uno olamii io ioi a comi		sing out of a separation agreement or divorce t	hat you did not
	claim subject to offset?	report as priority cl	laims	·
■ No	0	☐ Debts to pension	on or profit-sharing plans, and other similar deb	ots
□ Ye	es	Other, Specify	Debt Owed	

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Debtor 1 Jonathan Matthew Johnson Document Page 19 of 47
Case number (if know)

4.2	ARS	Multiple Last 4 digits of account number Accounts	\$1,427.00
	Nonpriority Creditor's Name P.O. Box 630806 Cincinnati, OH 45263	When was the debt incurred?	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Debt Owed	
1.3	CDA Pontiac	Last 4 digits of account number	\$554.00
	Nonpriority Creditor's Name 415 E Main Streator, IL 61364	When was the debt incurred?	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Debt Owed	
1.4	Community Hospital	Last 4 digits of account number 5495	\$224.00
	Nonpriority Creditor's Name c/o Komyatte & Casbon 9650 Gordon Drive	When was the debt incurred?	
	Highland, IN 46322 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	□ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other. Specify Medical Bills	

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Debtor 1 Jonathan Matthew Johnson Case number (if know) 4.5 Franciscan Alliance, Inc. Last 4 digits of account number 0500 \$2,496.00 Nonpriority Creditor's Name 37621 Eagle Way When was the debt incurred? Chicago, IL 60678 Number Street City State ZIp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes **Medical Bills** Other. Specify 4.6 **Illinois Dermatology Institute** Last 4 digits of account number 4289 \$20.00 Nonpriority Creditor's Name 2622 Momentum Place When was the debt incurred? Chicago, IL 60689 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No Π Yes **Medical Bills** Other. Specify 4.7 **Ingalls Memorial Hospital** Last 4 digits of account number 6705 \$684.00 Nonpriority Creditor's Name **Payment Processing Center** When was the debt incurred? P.O. Box 27685 Chicago, IL 60673 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Medical Bills ☐ Yes

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Debtor 1 Jonathan Matthew Johnson Case number (if know) 4.8 Komyatte & Casbon PC Last 4 digits of account number 5495 \$354.00 Nonpriority Creditor's Name 9650 Gordon Drive When was the debt incurred? Highland, IN 46322 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: \square At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes **Medical Bills** Other. Specify 4.9 MiraMed Revenue Group Last 4 digits of account number \$729.00 Nonpriority Creditor's Name P.O. Box 673879 When was the debt incurred? Detroit, MI 48267 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No lacksquare Debts to pension or profit-sharing plans, and other similar debts ☐ Yes **Medical Bills** Other. Specify 4.1 People's Gas \$440.00 Last 4 digits of account number Nonpriority Creditor's Name P.O. Box 2968 When was the debt incurred? Milwaukee, WI 53201 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims \square Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify Gas Bill

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Document Page 22 of 47 Case number (if know) Debtor 1 Jonathan Matthew Johnson 4.1 Sullivan Urgent Care Aid Ctrs 8031 \$371.00 Last 4 digits of account number Nonpriority Creditor's Name P.O. Box 740023 When was the debt incurred? Cincinnati, OH 45274 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not report as priority claims Is the claim subject to offset? ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Medical Bills ☐ Yes 4.1 **University of Chicago Hospital** 4248 \$3,700.00 Last 4 digits of account number Nonpriority Creditor's Name P.O. Box 70565 When was the debt incurred? Chicago, IL 60673 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No lacksquare Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Medical Bills ☐ Yes 4.1 University of Chicago Medicine \$285.00 1330 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 15965 Collections Center Drive Chicago, IL 60693 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: lacksquare At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt oxed Obligations arising out of a separation agreement or divorce that you did not

Part 3: List Others to Be Notified About a Debt That You Already Listed

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

 \square Debts to pension or profit-sharing plans, and other similar debts

Medical Bills

Part 4: Add the Amounts for Each Type of Unsecured Claim

■ No ☐ Yes report as priority claims

Other. Specify

Is the claim subject to offset?

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Debtor 1 Jonathan Matthew Johnson

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
	6a.	Domestic support obligations	6a.	\$ 0.00
Total claims				
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 0.00
			٠,	Total Claim
Tatal	6f.	Student loans	6f.	\$ 0.00
Total claims				
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ 0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 11,658.00
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 11,658.00

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Fill in this infor	mation to identify your	case:		
Debtor 1	Jonathan Matthe	w Johnson		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:		NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				☐ Check if this is an amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Tyes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company with	whom you have the r, Street, City, State and ZIP (contract or lease	State what the contract or lease is for
2.1					
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.2					
	Name				
	Number	Street			_
	City		State	ZIP Code	
2.3	,				
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.4					
2.7	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.5				-	
	Name				_
	Number	Street			_
	City		State	ZIP Code	<u>—</u>
	-117		Olalo	211 0000	

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		Docume	nt Page 25 d	of 47	
Fill in this	information to identify your	case:			
Debtor 1	Jonathan Matthe	w Johnson			
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filir	ng) First Name	Middle Name	Last Name		
United Sta	tes Bankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case num	ber				
(if known)				☐ Check if this is an	
				amended filing	
O((; ·	1.5				
	l Form 106H				
Sched	lule H: Your Cod	ebtors		12	/15
1. Do	you have any codebtors? (If	you are filing a joint case, o	do not list either spouse	e as a codebtor.	
■ No □ Yes	S				
	hin the last 8 years, have you a, California, Idaho, Louisiana			ry? (Community property states and territories include nington, and Wisconsin.)	
=					
	Go to line 3.				
□ res	s. Did your spouse, former spo	use, or legal equivalent live	e with you at the time?		
in line Form	2 again as a codebtor only	if that person is a guaran	tor or cosigner. Make	r if your spouse is filing with you. List the person s sure you have listed the creditor on Schedule D (O 06G). Use Schedule D, Schedule E/F, or Schedule G	fficial
	Column 1: Your codebtor Name, Number, Street, City, State and Z	IP Code		Column 2: The creditor to whom you owe the conclusion check all schedules that apply:	lebt
3.1				☐ Schedule D, line	
	Name			☐ Schedule E/F, line	
				☐ Schedule G, line	
_	Number Street			<u> </u>	
	City	State	ZIP Code		
3.2				Schedule D, line	
	Name			☐ Schedule E/F, line	
				☐ Schedule G, line	
	Number Street			_	
	City	State	7IP Code		

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SIII	in this information to identify your ca	200.						
		atthew Johnson						
	otor 2 puse, if filing)				_			
Uni	ted States Bankruptcy Court for the	: NORTHERN DISTRIC	CT OF ILLINOIS		_			
	se number nown)		-				ed filing	stpetition chaptering date:
0	fficial Form 106I					MM / DD/ Y	YYYY	
S	chedule I: Your Inc	ome						12/1
sup spo atta	as complete and accurate as possiblying correct information. If you use. If you are separated and you ch a separate sheet to this form. Describe Employment	are married and not filing wi	ng jointly, and your sp ith you, do not include	ouse infor	is living wit mation abo	h you, incl ut your spo	ude informatio ouse. If more s	n about your pace is needed,
1.	Fill in your employment information.		Debtor 1			Debtor 2	2 or non-filing s	spouse
	If you have more than one job,	Employment status	■ Employed Employment status			☐ Empl	oyed	
	attach a separate page with information about additional	Employment status	☐ Not employed Psychotherapist			☐ Not e	mployed	
	employers.	Occupation						
	Include part-time, seasonal, or self-employed work.	Employer's name	Edgewater Health	1				
	Occupation may include student or homemaker, if it applies.	Employer's address	1100 W. 6th Aven Gary, IN 46402	ue				
		How long employed the	here? 3 years					
Par	t 2: Give Details About Mor	nthly Income						
	mate monthly income as of the dause unless you are separated.	ate you file this form. If y	you have nothing to rep	ort for	any line, wri	te \$0 in the	space. Include	your non-filing
	u or your non-filing spouse have mo e space, attach a separate sheet to		ombine the information f	or all e	employers fo	r that perso	on on the lines b	elow. If you need
					For De	ebtor 1	For Debtor 2	
2.	List monthly gross wages, salar deductions). If not paid monthly, or			2.	\$	3,577.02	\$	N/A
3.	Estimate and list monthly overt	ime pay.		3.	+\$	0.00	+\$	N/A

Calculate gross Income. Add line 2 + line 3.

4. \$ 3,577.02

N/A

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Debt	or 1	Jonathan Matthew Johnson	_	С	ase number (if	known)				
					For Debtor 1			or Debtor		
	Con	y line 4 here	4.		\$ 3.57	7.02		on-filing s	spouse N/A	
	•				· <u>0,0.</u>		Τ.			<u>-</u>
5.	List	all payroll deductions:								
	5a.	Tax, Medicare, and Social Security deductions	5a.			32.04	\$		N/A	
	5b.	Mandatory contributions for retirement plans	5b.		\$	0.00	\$		N/A	_
	5c. 5d.	Voluntary contributions for retirement plans Required repayments of retirement fund loans	5c. 5d.		\$ \$	0.00	\$ \$		N/A N/A	_
	5e.	Insurance	5u. 5e.		· ———	9.19	\$		N/A	_
	5f.	Domestic support obligations	5f.		\$	0.00	\$		N/A	_
	5g.	Union dues	5g.		\$	0.00	\$		N/A	_
	5h.	Other deductions. Specify:	5h.		\$		+ \$		N/A	_
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	9	\$ 1,02	21.23	\$		N/A	_
7.	Cald	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	9	\$ 2,55	5.79	\$		N/A	_
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total								
		monthly net income.	8a.		\$	0.00	\$		N/A	
	8b.	Interest and dividends	8b.		\$	0.00	\$		N/A	_
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.		\$	0.00	\$		N/A	_
	8d.	Unemployment compensation	8d.	. :	\$	0.00	\$		N/A	_
	8e.	Social Security	8e.	. :	\$	0.00	\$		N/A	_
	8f. 8g.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: Pension or retirement income	e 8f. 8g.		\$ 	0.00 0.00	\$		N/A N/A	_
	8h.	Other monthly income. Specify:	8h.		\$		+ \$		N/A	_
	0			_		0.00	. —			_
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$		0.00	\$		N/A	A
10.	Calc	culate monthly income. Add line 7 + line 9.	10.	\$	2,555.79	+ \$		N/A	= \$	2,555.79
		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.		· —	2,000.70	4 1 .		1973		2,000.70
11.	1. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 11. +\$ 0.00									
12.		the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certainies							\$Combin	2,555.79 ned
13.	Doy	you expect an increase or decrease within the year after you file this form	?						monthl	ly income
		No.								
	\Box	Ves Explain:						-		

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Fill in thi	s information to identify yo	our case:					
Debtor 1	Jonathan Ma	atthew Johnson			Check	if this is:	
					_	an amended filing	
Debtor 2 (Spouse,	if filing)						ving postpetition chapter the following date:
(Spouse,	ii iiiiig)				'	3 expenses as or	the following date.
United Sta	ates Bankruptcy Court for the	NORTHERN DISTRI	CT OF ILLING	OIS	N	MM / DD / YYYY	
Case nun							
(If known))						
Offic	ial Form 106J						
	edule J: Your l						12/1
Be as co	omplete and accurate as tion. If more space is ne (if known). Answer ever	possible. If two married eded, attach another s					
Part 1:	Describe Your House his a joint case?	hold					
	-						
	No. Go to line 2. Yes. Does Debtor 2 live i	n a conarato houcobol	143				
		ii a separate nouseno	iu :				
	□ No	at file Official Form 106 l	2	for Congress House	hold of Dobto	· · · · ·	
	☐ Yes. Debtor 2 mus	st file Official Form 106J	-z, Expenses	ior separate nouse	noid of Debic)I Z.	
2. Do	you have dependents?	□ No					
	not list Debtor 1 and otor 2.	■ Yes. Fill out this inf each depende		Dependent's relati Debtor 1 or Debtor		Dependent's age	Does dependent live with you?
Do	not state the						□ No
	pendents names.			Daughter		4 years	■ Yes
							□ No
							☐ Yes
							□ No
							Yes
							□ No
2 Do	your expenses include	_					☐ Yes
	your expenses include benses of people other the	han No					
	urself and your depende						
Part 2:	Estimate Your Ongoin	na Monthly Exposes					
Estimat	e your expenses as of your expenses as of a date after the b	our bankruptcy filing d					
	expenses paid for with i						
	e of such assistance and Form 106l.)	a nave included it on 3	scriedule I: Y	our income		Your expe	enses
	e rental or home owners yments and any rent for the		residence. Ir	nclude first mortgage	4. \$		500.00
lf n	ot included in line 4:						
4a.	Real estate taxes				4a. \$		0.00
4b.		s, or renter's insurance			4b. \$		0.00
4c.	Home maintenance, re	pair, and upkeep expen	ses		4c. \$		0.00
4d.		ion or condominium due			4d. \$		0.00
5. Ad	ditional mortgage payme	ents for your residence	, such as hor	me equity loans	5. \$		0.00

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ebtor 1	Jonathan Matthew Johnson	Case num	ber (if known)	
. Utiliti	es.			
. 6a.	Electricity, heat, natural gas	6a.	\$	195.00
6b.	Water, sewer, garbage collection	6b.	\$	0.00
6c.	Telephone, cell phone, Internet, satellite, and cable services	6c.	·	350.00
6d.	Other. Specify:	6d.	·	0.00
	and housekeeping supplies	7.	·	
	care and children's education costs		\$	350.00
		8.	•	90.00
	ing, laundry, and dry cleaning	9.	\$	120.00
	onal care products and services	10.	\$	100.00
	cal and dental expenses	11.	\$	60.00
	sportation. Include gas, maintenance, bus or train fare.	12.	\$	210.00
	ot include car payments. 'tainment, clubs, recreation, newspapers, magazines, and books	13.	·	100.00
		14.	\$	
	itable contributions and religious donations	14.	Ф	100.00
5. Insur	ance. ot include insurance deducted from your pay or included in lines 4 or 20.			
	Life insurance	15a.	¢	0.00
	Health insurance	15a. 15b.	·	0.00
	Vehicle insurance		·	0.00
		15c.		68.00
	Other insurance. Specify:	15d.	\$	0.00
	s. Do not include taxes deducted from your pay or included in lines 4 or 20.	40	•	400.00
	fy: Back Taxes	16.	\$	100.00
	Ilment or lease payments:	170	¢	204.00
	Car payments for Vehicle 1	17a.	·	384.00
	Car payments for Vehicle 2	17b.	·	0.00
	Other. Specify:	17c.	·	0.00
	Other. Specify:	17d.	\$	0.00
	payments of alimony, maintenance, and support that you did not report as		¢	276.00
	cted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.		
	r payments you make to support others who do not live with you.		\$	0.00
Speci		19.		
	r real property expenses not included in lines 4 or 5 of this form or on Sch			0.00
	Mortgages on other property	20a.		0.00
	Real estate taxes	20b.	·	0.00
	Property, homeowner's, or renter's insurance	20c.		0.00
20d.	Maintenance, repair, and upkeep expenses	20d.	·	0.00
20e.	Homeowner's association or condominium dues	20e.	\$	0.00
. Other	r: Specify:	21.	+\$	0.00
	ulate your monthly expenses		.	0.000.00
	Add lines 4 through 21.		\$	3,003.00
22b. (Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	
22c. /	Add line 22a and 22b. The result is your monthly expenses.		\$	3,003.00
Color	ulate your menthly not income			
	ulate your monthly net income. Copy line 12 (your combined monthly income) from Schedule I.	225	¢	0 555 70
		23a.		2,555.79
23b.	Copy your monthly expenses from line 22c above.	23b.	-\$	3,003.00
00-	Cubbrook your monthly overage from your assettle in a con-			
23c.	Subtract your monthly expenses from your monthly income.	23c.	\$	-447.21
	The result is your <i>monthly net income</i> .	200.	*	
4 Do.	ou expect an increase or decrease in your expenses within the year after y	ou file this	form?	
	ample, do you expect to finish paying for your car loan within the year or do you expect you			e or decrease because o
	cation to the terms of your mortgage?		,	
■ No				
140				

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Fill in this in	nformation to identify your	case:			
Debtor 1	Jonathan Matthey	w.lohnson			
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)) First Name	Middle Name	Last Name		
United State	es Bankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case number	er				
(if known)					☐ Check if this is an
					amended filing
You must file		le bankruptcy schedules n connection with a bank	or amended schedules	rect information. . Making a false statement, on the statement, on the statement, on the statement, or im	
	Sign Below				
Did yo	u pay or agree to pay some	one who is NOT an attor	ney to help you fill out b	pankruptcy forms?	
■ No	0				
☐ Ye	es. Name of person				Petition Preparer's Notice, gnature (Official Form 119)
	penalty of perjury, I declare by are true and correct.	that I have read the sum	mary and schedules file	d with this declaration and	
X /s/	Jonathan Matthew John	son	X		
	nathan Matthew Johnson		Signature of	Debtor 2	
Sig	nature of Debtor 1		-		
Dat	te November 16, 2017		Date		

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Fill	in this inform	ation to identify you	r case:			
	tor 1	Jonathan Matthe				
		First Name	Middle Name	Last Name		
	tor 2 ise if, filing)	First Name	Middle Name	Last Name		
Unit	ed States Ban	kruptcy Court for the:	NORTHERN DISTRICT (OF ILLINOIS		
_		., .,				
(if kno	e number				_	heck if this is an mended filing
∩ff	icial For	m 107				
		-	Δffairs for Individ	duals Filing for B	ankruntev	4/16
infor	mation. If mo	ore space is needed,	attach a separate sheet to		equally responsible for sup additional pages, write you	
num	ber (if known). Answer every que	stion.			
Part	Give De	etails About Your Ma	rital Status and Where You	Lived Before		
1.	What is your	current marital statu	s?			
	☐ Married					
	■ Not marr	ied				
2.	During the la	st 3 years, have you	lived anywhere other than	where you live now?		
	■ No					
	_	all of the places you I	ived in the last 3 years. Do no	ot include where you live now		
	Debtor 1 Pri	or Address:	Dates Debtor 1	Debtor 2 Prior Ad	dress:	Dates Debtor 2
	20010		lived there	2000.21110111		lived there
					ity property state or territory co, Texas, Washington and W	
	■ No					
	☐ Yes. Mal	ke sure you fill out Scl	nedule H: Your Codebtors (O	fficial Form 106H).		
Part	2 Explain	the Sources of You	r Income			
	Fill in the total	amount of income yo	u received from all jobs and a	g a business during this yeall businesses, including parter together, list it only once ur		ndar years?
	□ No					
	Yes. Fill	in the details.				
			Debtor 1		Debtor 2	
			Sources of income	Gross income	Sources of income	Gross income
			Check all that apply.	(before deductions and exclusions)	Check all that apply.	(before deductions and exclusions)
From January 1 of current year until the date you filed for bankruptcy:			■ Wages, commissions, bonuses, tips	\$30,936.00	☐ Wages, commissions, bonuses, tips	
			☐ Operating a business		☐ Operating a business	

Official Form 107

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Page 32 of 47 Case number (if known) Debtor 1 **Jonathan Matthew Johnson**

				Debtor 1		Debtor 2		
				Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of inco Check all that ap		Gross income (before deductions and exclusions)
/ lanuary 1 to December 31 2016)		■ Wages, commissions, bonuses, tips	\$34,921.00	☐ Wages, comm bonuses, tips	nissions,			
				☐ Operating a business		☐ Operating a b	usiness	
		dar year be December		■ Wages, commissions, bonuses, tips	\$7,242.00	☐ Wages, comm bonuses, tips	nissions,	
				☐ Operating a business		☐ Operating a b	usiness	
5.	Include in and other winnings. List each	come regard public bene If you are fil	dless of wheth fit payments; ing a joint cas the gross inco	e during this year or the two ner that income is taxable. Exa pensions; rental income; inter se and you have income that y ome from each source separat	amples of other income are a est; dividends; money collec- rou received together, list it o	ted from lawsuits; ronly once under Deb	oyalties; and otor 1.	
				Debtor 1		Debtor 2		
				Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of inco Describe below.	me	Gross income (before deductions and exclusions)
Pa	rt 3: Lis	t Certain Pa	yments You	Made Before You Filed for I	Bankruptcy			
6.	Are eithe ☐ No.	Neither D	ebtor 1 nor D	's debts primarily consumer Debtor 2 has primarily consu personal, family, or househol	imer debts. Consumer debts	s are defined in 11 L	J.S.C. § 10 ⁻	1(8) as "incurred by an
		During the No.	90 days befo	ore you filed for bankruptcy, di	d you pay any creditor a tota	l of \$6,425* or more	?	
		☐ Yes	List below e	each creditor to whom you pai editor. Do not include paymer payments to an attorney for the	ts for domestic support oblig			
		* Subject	to adjustmen	t on 4/01/19 and every 3 years	s after that for cases filed on	or after the date of	adjustment.	
	Yes.			or both have primarily consure you filed for bankruptcy, di		I of \$600 or more?		
		■ No.	Go to line 7	·.				
		□ Yes	include pay	each creditor to whom you pai rments for domestic support of this bankruptcy case.				
	Creditor	's Name an	d Address	Dates of payme	nt Total amount	Amount you	Was this p	payment for

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Case number (if known) Debtor 1 **Jonathan Matthew Johnson**

7.	Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one fo a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony.							
	■ No							
	☐ Yes. List all payments to an insider.							
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for	this payment		
8.	Within 1 year before you filed for bankrupte insider? Include payments on debts guaranteed or cos		ments or transfer a	any property on a	eccount of a de	bt that benefited an		
	No							
	☐ Yes. List all payments to an insider							
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for Include credi	this payment tor's name		
Do	rt 4: Identify Legal Actions, Repossession	as and Faraslasures	•					
	List all such matters, including personal injury modifications, and contract disputes. No Yes. Fill in the details.	cases, small claims action	s, divorces, concent	n suits, paternity e	ionorio, Support	or custody		
	Case title Case number	Nature of the case	Court or agency		Status of the	e case		
10.	Within 1 year before you filed for bankrupte Check all that apply and fill in the details below No. Go to line 11. Yes. Fill in the information below. Creditor Name and Address		erty repossessed, f	oreclosed, garnis	shed, attached	, seized, or levied? Value of the		
		Explain what happened	4			property		
11.	Within 90 days before you filed for bankrup accounts or refuse to make a payment bec No Yes. Fill in the details.	otcy, did any creditor, inc		nancial institution	n, set off any a	mounts from your		
	Creditor Name and Address	Describe the action the	creditor took	Date taker	action was	Amount		
12.	Within 1 year before you filed for bankrupte court-appointed receiver, a custodian, or a ■ No □ Yes		erty in the possess	ion of an assigne	ee for the bene	fit of creditors, a		
Pa	rt 5: List Certain Gifts and Contributions							
13.	Within 2 years before you filed for bankrup ■ No □ Yes. Fill in the details for each gift.	tcy, did you give any gift:	s with a total value	of more than \$60	00 per person?			
	Gifts with a total value of more than \$600 per person	Describe the gifts		Date the g	s you gave lifts	Value		
	Person to Whom You Gave the Gift and Address:							

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	043C 11 04011 D00	Doour	nent Page 34 c	11/10/11 14 17	.00.00	, ividiii		
Deb	otor 1 Jonathan Matthew Johnson	Docum	ieiii Paye 34 C	Case number (if	known)			
	Within 2 years before you filed for bankr	uptcy, did you gi	ive any gifts or contribut	tions with a total	value of more than	\$600 to any charity?		
	No							
	Yes. Fill in the details for each gift or c							
	Gifts or contributions to charities that to more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code		be what you contributed		Dates you contributed	Value		
Part	t 6: List Certain Losses							
	Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster or gambling?							
	■ No □ Yes. Fill in the details.							
	Describe the property you lost and	Describe any in	surance coverage for the	e loss	Date of your	Value of property		
	how the loss occurred	•	unt that insurance has paid	loss	lost			
			on line 33 of Schedule A					
Part	t 7: List Certain Payments or Transfers	\$						
	Include any attorneys, bankruptcy petition p No ■ Yes. Fill in the details. Person Who Was Paid Address Frail or washelded		ption and value of any pr	·	Date payment or transfer was	Amount of payment		
	Email or website address Person Who Made the Payment, if Not Y	′ ou			made			
	Law Offices of Jeffrey L. Benson 3337 W. 95th Street Ste. # 2 Evergreen Park, IL 60805	Attorn	ey Fees			\$0.00		
	Within 1 year before you filed for bankru promised to help you deal with your cree Do not include any payment or transfer that	ditors or to make	e payments to your credi		transfer any prope	rty to anyone who		
	■ No □ Yes. Fill in the details.							
	Person Who Was Paid Address	Descrip transfe	otion and value of any pr rred	roperty	Date payment or transfer was made	Amount of payment		
	Within 2 years before you filed for bankr transferred in the ordinary course of you Include both outright transfers and transfers include gifts and transfers that you have alr	ur business or fir s made as security	nancial affairs? y (such as the granting of a					

 $\hfill \square$ Yes. Fill in the details.

Person Who Received Transfer Address

Person's relationship to you

Description and value of property transferred

Describe any property or payments received or debts paid in exchange

Date transfer was made

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Case number (if known) Document

Debtor 1 Jonathan Matthew Johnson

19.		s before you filed for bankrup hese are often called asset-pro		ny property to a	self-settle	ed trust or similar devic	e of v	vhich you are a
	_	the details.						
	Name of trust		Description and	value of the pro	perty trans	sferred		ate Transfer was
Pai	rt 8: List of Co	ertain Financial Accounts, In	struments, Safe Depos	it Boxes, and St	orage Unit	ts		
20.	Within 1 year b	efore you filed for bankruptor transferred?	cy, were any financial ac	ccounts or instr	uments he	eld in your name, or for	your	benefit, closed,
	Include checki	ng, savings, money market, on funds, cooperatives, asso	or other financial accou ciations, and other fina	ınts; certificates ncial institution	of deposi s.	it; shares in banks, cred	dit un	ions, brokerage
	_	the details.						
		ncial Institution and er, Street, City, State and ZIP	Last 4 digits of account number	Type of accordinstrument	unt or	Date account was closed, sold, moved, or transferred		Last balance before closing or transfer
21.	Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?							
	■ No □ Yes. Fill in	the details.						
		ncial Institution er, Street, City, State and ZIP Code)	Who else had ac Address (Number, State and ZIP Code)		Describe	the contents		Do you still have it?
22.	Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy?							
	■ No							
	☐ Yes. Fill in	the details.						
	Name of Stora Address (Numb	ge Facility er, Street, City, State and ZIP Code)	Who else has or to it? Address (Number, State and ZIP Code)		Describe	the contents		Do you still have it?
Pai	rt 9: Identify F	Property You Hold or Control	for Someone Else					
23.	Do you hold or for someone.	control any property that so	omeone else owns? Incl	lude any proper	ty you bor	rowed from, are storing	j for,	or hold in trust
	■ No							
	☐ Yes. Fill in	n the details.						
	Owner's Name Address (Numb	er, Street, City, State and ZIP Code)	Where is the pro (Number, Street, City, Code)		Describe	the property		Value
Pai	rt 10: Give Deta	ails About Environmental Inf	ormation					
For	the purpose of	Part 10, the following definiti	ions apply:					
	toxic substanc	law means any federal, state es, wastes, or material into t ntrolling the cleanup of these	he air, land, soil, surfac	e water, ground	• .			
	Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used							

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance,

to own, operate, or utilize it, including disposal sites.

hazardous material, pollutant, contaminant, or similar term.

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Debtor 1 Jonathan Matthew Johnson

24.	4. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?							
	■ No							
	Yes. Fill in the details.							
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice				
25.	Have you notified any governmental unit of a	nny release of hazardous material?						
	■ No □ Yes. Fill in the details.							
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice				
26.	Have you been a party in any judicial or adm	inistrative proceeding under any environ	mental law? Include settlements a	nd orders.				
	■ No							
	Yes. Fill in the details.							
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	ture of the case	Status of the case				
Par	11: Give Details About Your Business or C	Connections to Any Business						
27.	Within 4 years before you filed for bankrupto	y, did you own a business or have any o	f the following connections to any	business?				
	☐ A sole proprietor or self-employed in	a trade, profession, or other activity, eith	ner full-time or part-time					
	☐ A member of a limited liability compa	nny (LLC) or limited liability partnership (LLP)					
	☐ A partner in a partnership							
	☐ An officer, director, or managing exe	cutive of a corporation						
	☐ An owner of at least 5% of the voting	or equity securities of a corporation						
	■ No. None of the above applies. Go to Pa	art 12.						
	Yes. Check all that apply above and fill i							
		Describe the nature of the business	Employer Identification number					
	Address (Number, Street, City, State and ZIP Code)	Name of accountant or bookkeeper	Do not include Social Security r	number or ITIN.				
		·	Dates business existed					
28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include institutions, creditors, or other parties.								
	No							
	Yes. Fill in the details below.							
	Name Address (Number, Street, City, State and ZIP Code)	Date Issued						

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Debtor 1 Jonathan Matthew Johnson

Part 1	2: Sign Below		
are tru with a	e and correct. I understand that maki		leclare under penalty of perjury that the answers otaining money or property by fraud in connection rs, or both.
/s/ Jo	nathan Matthew Johnson		
Jonathan Matthew Johnson Signature of Debtor 1		Signature of Debtor 2	
Date	November 16, 2017	Date	
Did yo	u attach additional pages to <i>Your Sta</i>	tement of Financial Affairs for Individuals Filing	for Bankruptcy (Official Form 107)?
■ No			
☐ Yes			
Did yo	u pay or agree to pay someone who i	s not an attorney to help you fill out bankruptcy	forms?
■ No			
☐ Yes	. Name of Person Attach the Ba	ankruptcy Petition Preparer's Notice, Declaration, a	nd Signature (Official Form 119).

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Fill in this inform	ation to identify your	case.				
Debtor 1	Jonathan Matthey					
Debioi 1	First Name	Middle Name		Last Name		
Debtor 2 (Spouse if, filing)	First Name	Middle Name		Last Name		
			DIOT OF ILL			
United States Ban	kruptcy Court for the:	NORTHERN DIST	RICT OF ILLI	NOIS		
Case number						Charlett this is an
(ii kilowii)						☐ Check if this is an amended filing
						Ç
Official For	m 108					
		n far India	ماميام	Filing Under C	hamtar T	7
Statemen	t of intentio	n tor indiv	iduais	Filing Under C	napter <i>i</i>	12/15
If you are an indiv	idual filing under chap	oter 7. vou must fill	out this forn	n if:		
	claims secured by yo	-				
	d personal property a					
	er is earlier, unless th			bankruptcy petition or by tl ise. You must also send co		
	ople are filing together I date the form.	in a joint case, bot	th are equally	responsible for supplying	correct inform	ation. Both debtors must
	nd accurate as possib ur name and case nun		needed, atta	ch a separate sheet to this	form. On the to	op of any additional pages,
Day / Lint Van	O 111 W/I II	. 0				
Part 1: List You	ur Creditors Who Have	Secured Claims				
1. For any creditor information below		rt 1 of Schedule D:	Creditors W	ho Have Claims Secured by	y Property (Off	icial Form 106D), fill in the
	ditor and the property th	nat is collateral	What do you	ou intend to do with the pro debt?	perty that	Did you claim the property as exempt on Schedule C?
Creditor's All	y Financial		Surrende	er the property.		□ No
name:	•			he property and redeem it.		_
Description of	2007 Chrysler 300	120 000 miles		ne property and enter into a		Yes
property	miles	120,000 IIIIes		mation Agreement. ne property and [explain]:		
securing debt:	Debtor is surrende	ring vehichle				
Part 2: List You	ur Unexpired Persona	Droporty Loseos				
For any unexpired	personal property lea	ase that you listed i				ases (Official Form 106G), fill
				es are leases that are still in pes not assume it. 11 U.S.C.		se period has not yet ended.
Describe your un	expired personal prop	erty leases			Wil	I the lease be assumed?
Lessor's name:						Na
Description of leas	sed				Ц	INO
Property:						Yes
Lessor's name:						No
Description of leas	sed					
Property:						Yes
Lessor's name:						No

Statement of Intention for Individuals Filing Under Chapter 7

Official Form 108

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Debtor 1 Jonathan Matthew Johnson	Case number (if known)
Description of leased Property:	☐ Yes
Lessor's name: Description of leased Property:	□ No □ Yes
Lessor's name: Description of leased Property:	□ No □ Yes
Lessor's name: Description of leased Property:	□ No □ Yes
Lessor's name: Description of leased Property:	□ No □ Yes
Part 3: Sign Below Under penalty of perjury, I declare that I have indicated my intention a property that is subject to an unexpired lease. X /s/ Jonathan Matthew Johnson	bout any property of my estate that secures a debt and any personal
Jonathan Matthew Johnson Signature of Debtor 1	Signature of Debtor 2
Date November 16, 2017	Date

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

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most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

\$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/Bankruptcy/Resources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 17-34377 Doc 1 Filed 11/16/17 Entered 11/16/17 14:03:56 Desc Main Document Page 44 of 47

B2030 (Form 2030) (12/15)

United States Bankruptcy CourtNorthern District of Illinois

In re	Jonathan Matthew Johnson		Case No.		
		Debtor(s)	Chapter	7	
	DISCLOSURE OF COMPEN	NSATION OF ATTO	RNEY FOR DE	CBTOR(S)	
	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(compensation paid to me within one year before the filing be rendered on behalf of the debtor(s) in contemplation of	g of the petition in bankruptcy	, or agreed to be paid	to me, for services rend	lered or to
	For legal services, I have agreed to accept		\$	895.00	
	Prior to the filing of this statement I have received		\$	0.00	
	Balance Due			895.00	
2.	0.00 of the filing fee has been paid.				
3.	The source of the compensation paid to me was:				
	■ Debtor □ Other (specify):				
4. ′	The source of compensation to be paid to me is:				
	■ Debtor □ Other (specify):				
5.	■ I have not agreed to share the above-disclosed compe	ensation with any other person	unless they are meml	pers and associates of m	ıv law firm.
	☐ I have agreed to share the above-disclosed compensa copy of the agreement, together with a list of the name	ation with a person or persons v	who are not members	or associates of my law	
5.	In return for the above-disclosed fee, I have agreed to re-	nder legal service for all aspec	ts of the bankruptcy c	ase, including:	
1	a. Analysis of the debtor's financial situation, and rende b. Preparation and filing of any petition, schedules, state c. Representation of the debtor at the meeting of credito d. [Other provisions as needed] Negotiations with secured creditors to re reaffirmation agreements and application 522(f)(2)(A) for avoidance of liens on hou	ement of affairs and plan which ors and confirmation hearing, a educe to market value; ex- ns as needed; preparation	n may be required; nd any adjourned hear emption planning;	rings thereof;	ng of
7.	By agreement with the debtor(s), the above-disclosed fee Representation of the debtors in any dis any other adversary proceeding.	does not include the following chargeability actions, judi	g service: icial lien avoidance	es, relief from stay a	ctions or
		CERTIFICATION			
	I certify that the foregoing is a complete statement of any ankruptcy proceeding.	agreement or arrangement for	r payment to me for re	epresentation of the deb	tor(s) in
	ovember 16, 2017 ate	Isl Jeffrey L. Benson Signature of Attorna Law Offices of Je 3337 W. 95th Street Ste. # 2 Evergreen Park, 312-607-0048 Fajeffrey-benson@ Name of law firm	n 6203738 ey effrey L. Benson eet IL 60805 ax: 708-499-1940		_

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United States Bankruptcy Court Northern District of Illinois

In re	Jonathan Matthew Johnson		Case No.	
		Debtor(s)	Chapter	7
	VE	RIFICATION OF CREDITOR MA	TRIX	
	Number of Creditors:			
	The above-named Debtor(s) (our) knowledge.	hereby verifies that the list of creditor	rs is true and	correct to the best of my
Date:	November 16, 2017	/s/ Jonathan Matthew Johnson Jonathan Matthew Johnson Signature of Debtor		

Ally Financial P.O. Box 380901 Minneapolis, MN 55438

American Credit Bureau P.O. Box 4545 Boynton Beach, FL 33437

ARS P.O. Box 630806 Cincinnati, OH 45263

CDA Pontiac 415 E Main Streator, IL 61364

Community Hospital c/o Komyatte & Casbon 9650 Gordon Drive Highland, IN 46322

Franciscan Alliance, Inc. 37621 Eagle Way Chicago, IL 60678

Illinois Dermatology Institute 2622 Momentum Place Chicago, IL 60689

Ingalls Memorial Hospital Payment Processing Center P.O. Box 27685 Chicago, IL 60673

Komyatte & Casbon PC 9650 Gordon Drive Highland, IN 46322

MiraMed Revenue Group P.O. Box 673879 Detroit, MI 48267

People's Gas P.O. Box 2968 Milwaukee, WI 53201

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Sullivan Urgent Care Aid Ctrs P.O. Box 740023 Cincinnati, OH 45274

University of Chicago Hospital P.O. Box 70565 Chicago, IL 60673

University of Chicago Medicine 15965 Collections Center Drive Chicago, IL 60693